## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
(571)-273-2885

appropriate. All further co indicated unless corrected maintenance fee notificatio	orm should be used for orrespondence including below or directed others.	or transmitting the I g the Patent, advancerwise in Block 1, b	SSUE FEE and PUBLICAT se orders and notification of by (a) specifying a new corre						
CURRENT CORRESPONDEN		ess) No Fee pal ha	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.						
5514 75	590 07/23/								
FITZPATRICK 30 ROCKEFELLE NEW YORK, NY	ER PLAZA	I h Sta ado tra	Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.						
	•						(Depositor's name)		
						(Signature)			
							(Date)		
APPLICATION NO. FILING DATE		FIRST NAMED INVENTOR	ST NAMED INVENTOR		NEY DOCKET NO.	CONFIRMATION NO.			
09/597,146 06/20/2000			Daiki Kadomatsu	Daiki Kadomatsu			00862.021941. 5114		
TITLE OF INVENTION: II	MAGE COMMUNICA	ATION APPARATUS	S AND METHOD						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	NO	\$1510	<b>\$0</b>	. \$0		\$1510	10/23/2009		
EXAMINER		ART UNIT	CLASS-SUBCLASS	· ·		٠			
SHINGLES, KRISTIE D 24		2444	709-201000	_					
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>			(1) the names of up to or agents OR, alternate (2) the name of a sing registered attorney or 2 registered patent att	2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
· · · · · · · · · · · · · · · · · · ·	RESIDENCE DATA	TO BE PRINTED C	ON THE PATENT (print or ty						
PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.									
(A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)									
Canon Kabı	ushiki Kaisha	Tokyo, Japa	Tokyo, Japan						
Please check the appropriate	e assigneë category or	categories (will not b	e printed on the patent):	Individual 🛛 C	orporatio	n or other private gr	oup entity Government		
4a. The following fee(s) are submitted:  Issue Fee  Publication Fee (No small entity discount permitted)  Advance Order - # of Copies			A check is enclosed.  Payment by credit ca	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 503939 (enclose an extra copy of this form).					
5. Change in Entity Status  a. Applicant claims S	MALL ENTITY statu	s. See 37 CFR 1.27.	b. Applicant is no lo						
NOTE: The Issue Fee and Pinterest as shown by the rec	Publication Fee (if requords of the United Stat	ired) will not be acce es Patent and Traden	epted from anyone other than nark Office.	the applicant; a reg	istered att	orney or agent; or the	he assignee or other party ir		
Authorized Signature	Joulh	Berel.	4	Date	8/	10/09			
Typed or printed name									

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.